

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0480081	MEADOWBROOK APARTMENTS, LLC			C	60	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
51 MEADOWBROOK RD			20				
Towns Served: ELLINGTON							

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per month	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/17 - 4/30/17		Complete
	5/1/17 - 5/31/17		Complete
	6/1/17 - 6/30/17		Complete
	7/1/17 - 7/31/17		Complete
	8/1/17 - 8/25/17		

Water System Facility: **WELL 1 (WSF ID: 77)**

E. Coli (3014)		1 triggered (TG) per period	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 1 (2)	7/28/17 - 8/2/17		Complete

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT CCR TO THE DEPARTMENT	11/6/2009	
SWTS 1: PWS TO RECOMMEND SOWT	3/31/2014	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	9/30/2014	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	3/31/2015	
CCTS 5: PWS OCCT INSTALLATION	8/6/2017	8/15/2017
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	8/29/2017	6/27/2017
LEAD PUBLIC EDUCATION REPORT TO STATE	9/8/2017	6/28/2017
SWTS 1: PWS TO RECOMMEND SOWT	12/31/2017	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	12/31/2017	
CCTS 1: PWS TO RECOMMEND OCCT	12/31/2017	2/22/2017
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	6/30/2018	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	6/30/2019	4/26/2017
CROSS CONNECTION EXEMPTION	3/1/2022	

Contact Information

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.